

REPURCHASE / REDEMPTION REQUEST FORM [RRF]

Participant Name	Centrun	Centrum Broking Limited									
Depository Participant ID	1	2	0	1		2	2		0	0	
RRN Date:											
RFN No Date :											
I/We offer the below mentioned M "All" or the number of MF Units bank draft. I/We hereby declare the	to the exter	nt of my/	our rep	urchas	e / red	emption	reques	t and p	roceeds	be paid to	me/us cheque/
Demat Account Number		(((((((((((((((((((16							
Name of First / Sole Holder		- L	4 3	Ų.				1	- 1	. 1	
Name of Second Holder											
Name of Third Holder											
No. of MF units to be Repur	chased/Re	deemed	d (in fic	ures)	or /"/	ALL"	" <i>p</i>	mour	ıt" (₹)		
in words	•		XXVIII II		•				1115CS155		
(integers											
and											
fractions)		202									
Name of the security / sche	eme										
Name of the issuing Compa	ny / AMC										
Face Value											
ISIN						0.					
If all holdings in the Dem	at account	are to b	e redee	med / r	epurc	hased,	then "A	ALL" sh	ould be	mentione	d in the
Quantity column.											
Specimen Signature(s)		Name					Signature				
First / Sole Holder											
Second Holder											
Third Holder											
Participant Authorization Received the above mentioned M	F Units for r	epurchas	se/ rede	mption	from						
Account No.								1			
ISIN								-			
Date D D	M	M	Υ	Υ		Υ	Υ				
Name of First / Sole Holder		Ц	•]			

The application form is verified with the details of the beneficial owner's account and certified that the application form is in order. The account has sufficient balance to accept the repurchase/ redemption request. It is also certified that the beneficial owner's signatures are verified and found to be in order.

RFN Set up Date: Time:

Depository Participant's Signature Seal Date